



HAVERSTOCK & OWENS LLP
162 North Wolfe Road
Sunnyvale, California 94086
(408) 530-9700
Customer No.: 28960

In re Application of:
Serial No.: 10/637,188
Filed: August 8, 2003
Entitled: MÉTHOD OF AND APPARATUS FOR MULTI-STAGE SORTING GLASS CULLETS
Group Art Unit: 3653
Examiner Name: Hageman, Mark

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

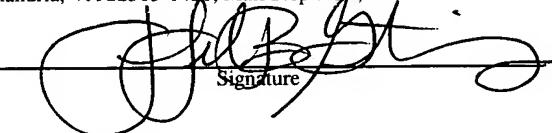
Sir:

This is a Request for a Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

CERTIFICATION UNDER 37 CFR § 1.08

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to : Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mail Stop RCE, November 13, 2006.

Junifel Gutierrez
(Name of Person Mailing Paper)


Signature

1. Submission required under C.F.R. § 1.114

a. Previously submitted

- i. Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
(Any unentered amendment(s) referred to above will be entered)
- ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
- iii. Other _____.

b. Enclosed

- i. Amendment/Reply
- ii. Affidavit(s)/Declaration(s)
- iii. Information Disclosure Statement (IDS)
- iv. Other _____.

2. Miscellaneous

a. Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months.
(Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)

b. Other _____

3. c. Applicant is entitled to small entity status

4. **Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

a. The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No.: 08-1275.

- i. RCE fee required under 37 C.F.R. § 1.17(e)
- ii. Extension of time fee (37 C.F.R. § 1.136 and 1.17)
- iii. Other _____.

b. Check in the amount of \$ 520.00 (the filing fee for a Request for Continued Examination in the amount of \$395.00 plus \$100.00 for one new independent claim and \$25.00 for an additional claim) is enclosed

c. Payment by credit card (form PTO-2038 enclosed)

5. Return Receipt Postcard

Dated: November 13, 2006

By: Jonathan O. Owens
Name: Jonathan O. Owens
Registration No.: 37,902

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